



Kid Central 2006-2007 School Year Emergency Information Form

Station Site: _____

(location)

HQ Site: _____

(location)

Please press firmly when writing

Parent/Guardian Information (may pick up child from program)

Child's Name (last, first): _____ **Grade in 2006-2007** _____

Sex: _____ **Age:** _____ **Date of Birth:** _____ **Home Phone:** _____

Home Address: _____ **City:** _____ **Zip:** _____

School Child Attends: _____ **Track:** __A__B__C__D__ **Trad.** _____

Mother's Name: _____ **Home Phone:** _____

Address: _____ **City:** _____ **Zip:** _____

Employer: _____ **Cell #:** _____ **Work #:** _____

Email: _____

Father's Name: _____ **Home Phone:** _____

Address: _____ **City:** _____ **Zip:** _____

Employer: _____ **Cell #:** _____ **Work #:** _____

Email: _____

I would like monthly KC reminders and news sent by email to: (circle choice) Mother Father Do Not Send

Names of all persons age 18 or older who may pick up child or be called in emergency (circle choice)

<u>Name</u>	<u>Relationship</u>	<u>Daytime Phone</u>	<u>Emerg.</u>	<u>Pick Up</u>
_____			Y or N	Y or N
_____			Y or N	Y or N
_____			Y or N	Y or N
_____			Y or N	Y or N

Physician/Dentist to be called, if needed, in Emergency (will call 911 when necessary)

Physician Name: _____ **Phone:** _____

Dentist Name: _____ **Phone:** _____

Local Hospital Preferred for Emergency Treatment : _____

Child's Medical Insurance: _____ **Medical Insurance Number:** _____

Medication child currently taking: _____

Allergies, limitations, or dietary restrictions: _____

Other i.e. fears, common behaviors, custody situations: _____

Hold Harmless Agreement

The Elk Grove Community Services District (hereinafter the "Elk Grove CSD"), its officers, trustees, agents and employees, and any co-sponsor of this activity, are not responsible for any claim, loss, injury(ies), liability or damages which may be suffered by the Participant while traveling to, during, or returning from the activity designated in this registration. Further, throughout the term of this Agreement, Participant [or Participant's parent or legal guardian, if Participant is under age 18] agrees to defend, indemnify and hold harmless the Elk Grove CSD, its officers, trustees, agents and employees from and against any and all claims, losses, injuries, liability or damages, including the payment of attorneys' fees, arising out of or resulting from participation in the activity designated in this registration. Additionally, the Participant [or Participant's parent or legal guardian, if Participant is under age 18] grants the Elk Grove CSD the right to photograph facilities, activities and Participant for potential future use for publicity or promotional purposes.

I have read and understand this notice. I have read and I understand the terms of the Registration Contract and the Kid Central Parent Handbook and I am signing below as an indication of my intent to have my child, _____, participate in Elk Grove CSD Parks & Recreation Dept.'s Kid Central program.

Parent /Guardian Signature _____

Date _____

Effective 5/1/06-6/30/07